9	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT 1591971 REPORT NO. E315002	5 2 27									
1 2	INTERSTATE CITY STAEET RESULTED STOLEN CASE # 14-00617	2 0 7									
2 3	STATE ROUTE OTHER LOCAL AGENCY CODING COUNTY RD PRIVATE WAY INVOLVED LOCAL AGENCY	5 2 28									
2 3	TRIBAL RESERVATION 02 OBJECT STRUCK										
3 1	M M D D V Y Y Y TIME (2400) COUNTY # MILES CITY # DATE OF O3	3									
4	ON (PRIMARY TRAFFIC WAY) INTERSECTION V NON-INTERSECTION BLOCK NO.	0 6 29									
4a	MILE POST										
5	DISTANCE OF (REFERENCE OF CROSS STREET) MILES N E LUNDEEN PRKWY FEET S W										
	UNIT 01 MOTOR PEDAL-CYCLE PHONE D: 4253743079	0 6 30									
62	LAST NAME KALAB FIRST NAME AMANDA MIDDLE INITIAL G										
	STREET 10526 95TH ST NE										
7	CITY LAKE STEVENS ST WA ZIP 982588975	1 1 2 31									
8	CDL RESTRICTIONS B ENDORSEMENTS	2									
9 1	DRIVER'S KALABAG031OT STATE WA SEX F D.O.B. 09 _ 30 _ 1997										
10 1	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE CLASS 1 NATURE OF INJURIES	1 2 32									
11 0 0	LICENSE PLATE # AKE9469 STATE WA VIN# JT2BG22K5V0008321	2									
12 0 0	TRAILER PLATE # STATE STATE STATE	3									
13 4	VEH, YEAR 1997 MAKE TOYO MODEL CAM4D STYLE 4D VEHICLE TOWED YES NO FINAL TOWARD BY STYLE 4D VEHICLE TOWED BY YES NO FINAL TOWARD BY YES N	5 1 33									
14 4	REGISTERED OWNER INFO. VEHICLE NO. 1 SHODE IN DAMAGED AREA LIABILITY INSURANCE INSURANCE CO & POULCY II USAA CASUALTY INSURANCE COMPANY 006043329C71019	5 1 34									
15 2	VECTOR OF CITATION # CHARGE										
16 2	UNIT 02 VEHICLE VEHICLE PEDESTRIAN OWNER VES NO D: 4253359967	4 35									
	LAST NAME KYLANY FIRST NAME KAMAL MIDDLE INITIAL	37									
17	STREET NEW ADDRESS 8201 23RD PL NE	38									
18	CITY LAKE STEVENS ST WA ZIP 982586419	39									
19	CDL RESTRICTIONS B ENDORSEMENTS										
20	DRIVER'S LICENSE # KYLANK*394OA STATE WA SEX M D.O.B. 09 - 01 - 1961										
21	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE INJURY 1 NATURE OF INJURIES										
22	LICENSE PLATE # AKR5151 STATE WA VIN# 3N1BC1CP6CK805080										
23	TRAILER PLATE # STATE TRAILER PLATE # STATE	1 41									
24	VEH. YEAR 2012 MAKE NISS MODELVERHB STYLE 4H VEHICLE TOWED BY GOVELVERHOUS NO. 2 SHADE IN DAMAGERA FREA	1 42									
	INSUMANCE OF ALLSTATE 087814498										
25	OFFICER'S NAME (PRINT) BADGE OR ID # AGENCY										
26	DEFF LAMBER										





CORRECTION

REPORT NO.

E315002

CASE #

14-00617

NAME		_	ADDIT	IONAL	PERSO	NS INVO	DLVE	D (PASSI	ENGER	S AND	OR W	ITNESS	ES C	DNLY						_	
(LAST, FIRST, MIDDLE I	NIT(AL)														-		-		_		
ADDRESS & PHONE #												SEX	D. MMC	O.B.	Y		-		-		
PASSENGER V	VITNESS UI	NIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		IN	JURY LASS		N	ATURE OF	INJURIES		
NAME (LAST, FIRST, MIDDLE	NITIAL)																				
ADDRESS & PHONE #												SEX	MMI	.O.B.	γ		-E		-		
PASSENGER V	VITNESS U	NIT#		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		IN C	JURY LASS		N	ATURE OF	INJURIES		
NAME (LAST, FIRST, MIDDLE	NIT(AL)																				
ADDRESS & PHONE #												SEX	D	O.B.	Y		-[-[
PASSENGER	VITNESS U	NIT#		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		IN C	JURY LASS		N	ATURE OF	INJURIES		
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I CERTIFY (DECLA JEFF LAMBIER			PERJURY				STATE	03-1	6-14 0	ON THA 3:53 PM						ND CO	PRREC	CT. (RC)	N 9A.72.	085)	
APPROVED BY	ICER'S SIGNATI	JAE		UNIT	OR DIST.	DET		DATE	U		DATE		_	SIGNE			-				
JEFF LAMBIER 1	04											3/18/20		_	ZU PIVI	T	1-		-		
BADGE OR ID #	104		ORI#	WA03	11900				TIM	E POLICE	DISPATO	HED 1:1	11 PI	M		TIME	POLI	CE ARR	VED 1:2	0 PM	
PART	B 3000-345	-160 R (7/06	i)														F	PAGE	2	OF	3

Not Observed

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

•		CASE NUMBER 14-00617	ONE STEVENS							
VICTIM / WITNESS										
NON-DISCO NAME (LAST, FIRST MIDDLE)	Mace E	TH SEX DOB AGE 52	HGT WGT HAIR EYES							
STREET ADDRESS 720 23 PL NE	CITAKE	STEVEN STATE	RES. STATUS							
HOME PHONE 425-335-99 6.7	CELL PHONE	PLACE OF EMPLOYM	ENT							
WORK PHONE	EMAIL ADDRESS	Comment of the second								
I,, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.										
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Pauk										
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3										
I CERTIFY (OR DECLARE) UNDER PENALTY OF PE			IG IS TRUE AND CORRECT							
SIGNATURE:	DATE SIGN									
OFFICER/NUMBER:	DATE SIGN	LOCATION SIGNED	cus 41							

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

LAKE STEVENS POLICE DEPARTMENT **VICTIM/WITNESS STATEMENT CASE NUMBER** 14-0061 VICTIM / WITNESS NON-RACE | ETH NAME (LAST, FIRST MIDDLE) DOB DISC GRACE AMANOA DALAB STREET ADDRESS CITY STATE HOME PHONE CELL PHONE PLACE OF EMPLOYMENT 4252-374-3079 **WORK PHONE EMAIL ADDRESS** DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED. I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT SIGNATURE: **DATE SIGNED** LOCATION SIGNED amana 3/16/14

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

DATE SIGNED

2-16-14

PAGE____OF___

LOCATION SIGNED

OFFICER/NUMBER:

Case Numbers: \$5514000617 03/16/14 13:11:22 BY SPDF27 SP0233 Entered Dispatched 03/16/14 13:11:37 BY SPDP17 SP0213 Enroute 03/16/14 13:11:37 Onscene 03/16/14 13:20:58 Closed 03/16/14 13:51:27 Initial Type: COL Initial Alarm Level: Final Alarm Level: Final Type: COL (COLLISION, NON-PRIORITY) Pri: 2 Dispo: H Police BLK: SSØØ2 Fire BLK: AG1618 Map Page: 377E-5 Group: SS1 Beat: WEST Src: T Loc: LUNDEEN PK/SR 9 NE , LKS (V) Loc Info: Name: LIZ Addr: Phone: 2064846032 /1311 (SPØ233) ENTRY ,NB LANE, REAR END ACCIDENT, UNK INJ, PARTIALLY BLCKING. BLU VEH AND N/D OF THE OTHER /1311 #AG14000790 CROSS /1311 (SP0213) DISPER 19D2 #SS105 IRWIN, OFFICER (DENNIS) 71316 \$CROSS #SS14005011 71316 DUP #SS14005011 /1316 DUP NAM: RUBIO, JAMES PHO: 4252688646 71316? (SPØ348) SUPP NAM: MONIQUE. PHO: 4256862526, TXT: END CALLER ADVISING SO LUNDEEN , 3RD PARTY REPORT FROM HUSB IN BLU VE H 71320 (SPØ213) ASSTOS 19D1 ISOPER HILL RD/SR 9 NE ,LKS1 #SS104 LAMBIER, OFFICER (JEFF) /1321 CHANGE LOC: SOPER HILL RD/SR 9 NE ,LKS --> LUNDEEN PK/ SR 9 NE ,LKS, LOCI: SO OF TRCK SCALES --> /1322 ONSCNE 19D2 19D1 \$S\$14000617 /1340 ASNCAS /1344 CLEAR 19D2 /1351 D/H CLEAR 19D1

03/16/14 15:58:58 PRINT REQUESTED BY TERMINAL SSCN03

/1351

CLOSE

19D1

Incident History for: #SS14005010 Xref: #SS14005011 #AG14000790

